

General Assembly

Raised Bill No. 6549

January Session, 2013

LCO No. 3666



Referred to Committee on INSURANCE AND REAL ESTATE

Introduced by: (INS)

14

AN ACT ESTABLISHING A MEDIATION PROGRAM FOR CERTAIN INSURANCE POLICY CLAIMS ARISING FROM A CATASTROPHIC EVENT.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- Section 1. Section 38a-9 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2013*):
- 3 (a) Notwithstanding the provisions of section 4-8, there shall be a 4 Division of Consumer Affairs within the Insurance Department, which 5 division shall act on the Insurance Commissioner's behalf and at his 6 direction in order to carry out his responsibilities under this title with 7 respect to such matters. The division shall receive and review 8 complaints from residents of this state concerning their insurance problems, including claims disputes, and serve as a mediator in such 10 disputes in order to assist the commissioner in determining whether 11 statutory requirements and contractual obligations within the 12 commissioner's jurisdiction have been fulfilled. There shall be a 13 director of said division, who shall be provided with sufficient staff.

LCO No. 3666 **1** of 8

The division shall serve to coordinate all appropriate facilities in the

department in addressing such complaints, and conduct any outreach programs deemed necessary to properly inform and educate the public on insurance matters. The director shall submit quarterly reports to the commissioner [, which] that shall state the number of complaints received by the division in such calendar quarter, the Connecticut premium volume of the appropriate line of each insurance company against which a complaint has been filed, the types of complaints received, and the number of such complaints which have been resolved. Such reports shall be published every six months and copies shall be made available to any interested resident of this state upon request. The commissioner shall report, in accordance with section 11-4a, to the joint standing committee of the General Assembly having cognizance of matters relating to insurance on or before January fifteenth annually, concerning the findings of such reports and suggestions for legislative initiatives to address recurring problems.

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

35

36

37

38

39

40

41

42

43

44

45

46

47

(b) (1) The Division of Consumer Affairs shall provide an independent arbitration procedure for the settlement of disputes between claimants and insurance companies concerning automobile physical damage and automobile property damage liability claims in which liability and coverage are not in dispute. Such procedure shall apply only to disputes involving private passenger motor vehicles as defined in subsection (e) of section 38a-363. Any company licensed to write private passenger automobile insurance, including collision, comprehensive and theft, in this state shall participate in the The shall arbitration procedure. commissioner appoint administrator for such procedure. Only those disputes in which attempts at mediation by the Division of Consumer Affairs have failed shall be accepted as arbitrable. The referral of the complaint to arbitration shall be made by the Insurance Department examiner who investigated the complaint. Each party to the dispute shall pay a filing fee of twenty dollars. The insurance company shall pay the [consumer] claimant the undisputed amount of the claim upon written notification from the department that the complaint has been referred to

LCO No. 3666 **2** of 8

arbitration. Such payment shall not affect any right of the [consumer] claimant to pursue the disputed amount of the claim.

50

51

52

53

54

55

56

57

58

59

60

61

62

63

64

65

66

67

68

69

70

71

72

73

74

75

76

77

78

79

80

(2) The commissioner shall prepare a list of at least ten persons, who have not been employed by the department or an insurance company during the preceding twelve months, to serve as arbitrators in the settlement of such disputes. The arbitrators shall be members of any dispute resolution organization approved by the commissioner. One arbitrator shall be appointed to hear and decide each complaint. Appointment shall be based solely on the order of the list. If an arbitrator is unable to serve on a given day, or if either party objects to the arbitrator, then the next arbitrator on the list shall be selected. The department shall schedule arbitration hearings as often, and in such locations, as it deems necessary. Parties to the dispute shall be provided written notice of the hearing at least ten days prior to the hearing date. The commissioner may issue subpoenas on behalf of the arbitrator to compel the attendance of witnesses and the production of documents, papers and records relevant to the dispute. Decisions shall be made on the basis of the evidence presented at the arbitration hearing. Where the arbitrator believes that technical expertise is necessary to decide a case, such arbitrator may consult with an independent expert recommended by the commissioner. The arbitrator and any independent technical expert shall be paid by the department on a per dispute basis as established by the commissioner. The arbitrator, as expeditiously as possible but not later than fifteen days after the arbitration hearing, shall render a written decision based on the information gathered and disclose the findings and the reasons to the parties involved. The arbitrator shall award filing fees to the prevailing party. If the decision favors the [consumer] claimant, the decision shall provide specific and appropriate remedies including interest at the rate of fifteen per cent per year on the arbitration award concerning the disputed amount of the claim, retroactive to the date of payment for the undisputed amount of the claim. The decision may include costs for loss of use and storage of the motor vehicle and shall

LCO No. 3666 3 of 8

specify a date for performance and completion of all awarded remedies. Notwithstanding any provision of the general statutes or any regulation, the Insurance Department shall not amend, reverse, rescind, or revoke any decision or action of any arbitrator. The department shall contact the [consumer] claimant not later than ten business days after the date for performance, to determine whether performance has occurred. Either party may make application to the superior court for the judicial district in which one of the parties resides or, when the court is not in session, any judge thereof for an order confirming, vacating, modifying or correcting any award, in accordance with the provisions of sections 52-417, 52-418, 52-419 and 52-420. If it is determined by the court that either party's position after review has been improved by at least ten per cent over that party's position after arbitration, the court may grant to that party its costs and reasonable attorney's fees. No evidence, testimony, findings, or decision from the department arbitration procedure shall be admissible in any civil proceeding, except judicial review of the arbitrator's decision as contemplated by this subsection.

81

82

83

84

85

8687

88

89

90

91

92

93

94

95

96

97

98

99

100 101

102

103

104

105

106

107

108

109

110

111112

113

(3) The department shall maintain records of each dispute, including names of parties to the arbitration, the decision of the arbitrator, compliance, the appeal, if any, and the decision of the court. The department shall annually compile such statistics and send a copy to the committee of the General Assembly having cognizance of matters relating to insurance. The report shall be considered a public document.

(c) (1) The Division of Consumer Affairs shall establish a program for the nonadversarial mediation of disputes between claimants and insurance companies for the settlement of claims arising under the claimant's (A) personal risk insurance policy, as defined in section 38a-663, other than a private passenger nonfleet automobile insurance policy, (B) condominium association master policy under section 47-83, or (C) unit owners' association property insurance policy under section 47-255, that involve loss due to a catastrophic event for which the

LCO No. 3666 **4** of 8

Governor has declared a state of emergency. Any company licensed to write the lines of insurance set forth in subparagraphs (A) to (C), inclusive, of this subdivision, shall participate in the mediation program. For purposes of this subsection, "claim" means any dispute arising from such catastrophic event, in which the difference between the position of the parties is five hundred dollars or more, notwithstanding any applicable deductible, or for which the insurer has denied payment for a loss arising from such event, except that the parties may agree to mediate a dispute involving a lesser amount. A claim does not include a dispute with respect to which the insurer has reported allegations of fraud, based on an investigation by the insurer's special investigative unit, to the Insurance Department.

(2) The commissioner may designate an entity or individual as the commissioner's designee to carry out the responsibilities of this subsection. The insurer shall bear all costs of conducting a mediation proceeding, including, but not limited to, an administrative fee established by the commissioner in an amount not to exceed seven hundred fifty dollars, for the Insurance Department's or the commissioner's designee's administration of such proceeding, and the mediator's fee. The insurer shall pay such fees, which shall be nonrefundable, to the Insurance Department, except that if, as a result of a mediation proceeding, it is determined that the only coverage applicable is provided under the National Flood Insurance Program, the administrative fee paid by the insurer shall be refunded to the insurer or credited to the insurer's account with the Insurance Department or with said department's administrative designee of the mediation program.

(3) The commissioner shall prepare a list of at least ten persons, who have not been employed by the department or an insurance company during the preceding twelve months, to serve as mediators in the settlement of such disputes. The mediators shall be members of any dispute resolution organization approved by the commissioner. One mediator shall be appointed to hear and decide each complaint.

LCO No. 3666 **5** of 8

147 Appointment shall be based solely on the order of the list. If a mediator is unable to serve on a given day, or if either party objects to 148 the mediator, then the next mediator on the list shall be selected. The 149 department shall schedule mediation hearings as often, and in such 150 locations, as it deems necessary. Parties to the dispute shall be 151 provided written notice of the hearing at least ten days prior to the 152 hearing date. The commissioner may issue subpoenas on behalf of the 153 154 mediator to compel the attendance of witnesses and the production of documents, papers and records relevant to the dispute. Decisions shall 155 156 be made on the basis of the evidence presented at the mediation 157 hearing. Where the mediator believes that technical expertise is necessary to decide a case, such mediator may consult with an 158 159 independent expert recommended by the commissioner. The mediator 160 and any independent technical expert shall be paid by the department on a per dispute basis as established by the commissioner. The 161 162 mediator, as expeditiously as possible but not later than fifteen days after the mediation hearing, shall render a written decision based on 163 the information gathered and disclose the findings and the reasons to 164 165 the parties involved. If the decision favors the claimant, the decision 166 shall provide specific and appropriate remedies including interest at the rate of fifteen per cent per vear on the mediation award concerning 167 168 the disputed amount of the claim, retroactive to the date of payment 169 for the undisputed amount of the claim or the date of the denial of the claim. The decision shall specify a date for performance and 170 completion of all awarded remedies. The department shall contact the 171 172 claimant not later than ten business days after the date for 173 performance, to determine whether performance has occurred.

(4) If an insured chooses not to participate in the mediation program or if the parties are unsuccessful at resolving the claim through a mediation proceeding, the insured may proceed under the appraisal process set forth in the insured's insurance policy or by any other dispute resolution procedure available pursuant to state law, or bring an action in the superior court of the judicial district in which the loss

174

175

176

177

178

179

LCO No. 3666 **6** of 8

180 occurred.

181

182

183

184

185

186

187

188

189

190

191

192

193

194

195

196

197

198

199

200

201

202

203

204

205

206

[(c)] (d) Notwithstanding the provisions of section 4-8, there shall be a Division of Rate Review within the Insurance Department, which division shall act on the commissioner's behalf and at the commissioner's direction in order to carry out the commissioner's responsibilities under this title with respect to such matters. Subject to the provisions of sections 38a-663 to 38a-696, inclusive, the division shall assist the commissioner in reviewing rates and supplementary rate information filed with the department for compliance with statutory requirements and standards. The division's staff shall include rating examiners with sufficient actuarial expertise. Upon the request the commissioner, the division shall review rates supplementary rate information, and any suspected violation of the statutory requirements and standards of sections 38a-663 to 38a-696, inclusive, found pursuant to such review shall be referred to the commissioner for appropriate action. The division may assist the commissioner in formalizing the commissioner's findings regarding such actions. The commissioner shall report, in accordance with section 11-4a, to the joint standing committee of the General Assembly having cognizance of matters relating to insurance on or before January fifteenth annually, concerning (1) the number and type of reviews conducted by the division in the prior calendar year, and (2) the percentage of increase or decrease in rates reviewed by the division during the preceding calendar year, by line and subline of insurance.

- [(d)] (e) The directors and staff of both the Division of Consumer Affairs and the Division of Rate Review shall be appointed by the commissioner under the provisions of chapter 67.
- Sec. 2. Section 38a-10 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2013*):
- 209 (a) The Insurance Commissioner shall adopt regulations, in accordance with the provisions of chapter 54, to carry out the purposes

LCO No. 3666 7 of 8

- 212 (b) The Insurance Commissioner shall adopt regulations, in 213 accordance with the provisions of chapter 54, to carry out the purposes 214 of subsection (c) of section 38a-9, as amended by this act. Such 215 regulations shall include, but not be limited to: (A) The form and 216 manner of notification by the insurer to an insured of the right to 217 mediation; (B) the forms and procedures for an insured or insurer to 218 request a mediation proceeding; (C) the requirements for an insurer's 219 participation at the mediation hearing; (D) the procedures for 220 scheduling a mediation hearing; (E) the conduct of a mediation 221 hearing; and (F) post-mediation reporting requirements, including the 222 effect of any settlement agreement in the release of claims.
- (c) Copies of the regulations shall be provided to any person upon request.

This act sha sections:	ll take effect as follows	and shall amend the following	g
Section 1	October 1, 2013	38a-9	
Sec. 2	October 1, 2013	38a-10	

Statement of Purpose:

To establish a mediation program for disputes between claimants and insurance companies for the settlement of claims, for certain insurance policies, that arise from a loss due to a catastrophic event for which the Governor has declared a state of emergency.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]

LCO No. 3666 **8** of 8